## **List of Tables and Figures**

| Chapter 1. Introduction and Summary of Conclusions       |  | Table 2.6.  | Prevalence (% and 95% confidence interval) of ever smoking among young women aged 18–24 years, by selected character-   |
|--|--|-------------|---|
| Figure 1.1.  | Prevalence (%) of current smoking among<br>adults aged 18 years or older, by gender,<br>National Health Interview Survey, United   |             | istics, National Health Interview Survey,<br>United States, 1965–1998 50  |
| Figure 1.2.  | States, 1965–1998 8  Prevalence (%) of current smoking and daily smoking among high school senior girls, by race, Monitoring the Future Survey, United States, 1976–1997, aggregate  | Table 2.7.  | Prevalence (% and 95% confidence interval) of current smoking among young women aged 18–24 years, by selected characteristics, National Health Interview Survey, United States, 1965–1998 52  |
| Figure 1.3.  | data 9  Age-adjusted death rates for lung cancer and breast cancer among women, United States, 1930–1997 10  | Table 2.8.  | Prevalence (% and 95% confidence interval) of ever trying smoking or ever smoking and current smoking among girls less than 18 years of age, by selected characteristics, National Household Survey on Drug Abuse and Youth Risk Behavior Survey, |
| Figure 1.4.  | Prevalence (%) of cigarette smoking during pregnancy, 1989–1998 11   |             | United States, 1998–1999 56   |
| Chapter 2. Patterns of Tobacco Use Among Women and Girls |  | Table 2.9.  | Prevalence (% and 95% confidence interval) of ever smoking and current smoking among high school seniors, by gender, Monitoring the Future Survey, United States, 1976–1998 60  |
| Table 2.1.   | Sources of national survey data on tobacco use, United States 24   | Table 2.10. | Percentage (and 95% confidence interval)  |
| Table 2.2.   | Prevalence (% and 95% confidence interval) of ever smoking among women aged 18 years or older, by selected characteristics, National Health Interview Survey, United States, 1965–1998 34  |             | of girls less than 18 years of age who were current smokers who reported frequent or heavy use of cigarettes, by selected characteristics, National Household Survey on Drug Abuse and Youth Risk Behavior Survey, United States, 1998–1999 64    |
| Table 2.3.   | Prevalence (% and 95% confidence interval) of current smoking among women aged 18 years or older, by selected characteristics, National Health Interview Survey, United States, 1965–1998 36   | Table 2.11. | Prevalence (% and 95% confidence interval) of ever smoking and current smoking among high school seniors, by gender and sociodemographic risk factors, Monitoring the Future Survey, United States, 1994–1998, aggregate data 65                  |
| Table 2.4.   | Prevalence (% and 95% confidence interval) of current smoking among adults aged 18 years or older, by gender and selected characteristics, National Health Interview Survey and National Household Survey on Drug Abuse, United States, 1997–1998 41 | Table 2.12. | Trends (% and 95% confidence interval) in the beliefs and attitudes of high school seniors about smoking and smokers, by gender, Monitoring the Future Survey, United States, 1981–1998 68  |
| Table 2.5.   | Distribution (% and 95% confidence interval) of the number of cigarettes smoked and percentage smoking 25 or more cigarettes per day, among women current  | Table 2.13. | Trends (% and 95% confidence interval) in<br>the opinions of high school seniors about<br>smokers, by gender, Monitoring the Future<br>Survey, United States, 1981, 1990, 1998 69   |
|  | smokers aged 18 years or older, by selected<br>characteristics, National Health Interview<br>Survey, United States, 1965–1998 44   | Table 2.14. | Prevalence (% and 95% confidence interval) of use of cigarette brands among current smokers aged 10–17 years, by gender   |

and race, Teenage Attitudes and Practices adults aged 18-24 years who were current Survey II, United States, 1993 70 smokers who reported selected indicators of nicotine dependence, by gender and Table 2.15. age, National Household Survey on Drug Trends (%) in live births in which mothers Abuse, United States, 1992-1994, aggregate reported smoking during pregnancy, by selected characteristics, United States, 1989data 91 1998 72 **Table 2.24.** Percentage (and 95% confidence interval) Table 2.16. Mean age (years and 95% confidence interof current women smokers aged 18 years val) at smoking initiation of regular smokor older who reported an interest in quiting for selected birth cohorts, by gender ting smoking or who recently attempted to and race or ethnicity, United States, 1931stop smoking, by selected characteristics, 1962 76 National Health Interview Survey, United States, 1995 94 Table 2.17. Mean recalled age (years and 95% confidence interval) at smoking initiation among Table 2.25. Mean number (and 95% confidence interpersons who ever smoked, by gender, val) of attempts to quit smoking among United States, 1961–1979 77 current smokers aged 18 years or older, by gender and selected characteristics, National Health Interview Survey, United Table 2.18. Cumulative percentage (and 95% confidence interval) of recalled age at which re-States, 1992 97 spondents aged 30-39 years first tried a ciga-rette or began to smoke daily, by gender, Table 2.26. Percentage (and 95% confidence interval) National Household Survey on Drug Abuse, of women aged 18 years or older who used United States, 1998 80 selected methods to quit smoking during most recent attempt, by smoking status, Table 2.19. Cumulative percentage (and 95% confi-National Health Interview Survey, United dence interval) of recalled age at which re-States, 1987 and 1992 98 spondents aged 18-21 years first tried a cigarette or began to smoke daily, by gender, Table 2.27. Percentage (and 95% confidence interval) National Household Survey on Drug Abuse, of women smokers aged 18 years or older United States, 1998 who have quit smoking, by selected characteristics, National Health Interview Sur-Table 2.20. Percentage (and 95% confidence interval) vey, United States, 1965-1998 102 of current women smokers aged 18 years or older who reported that they smoked Table 2.28. Percentage (and 95% confidence interval) their first cigarette within 10 or 30 minutes of smokers aged 18 years or older who of awakening, by selected characteristics, have quit smoking, by gender and selected characteristics, National Health Interview National Health Interview Survey, United States, 1987 84 Survey and National Household Survey on Drug Abuse, United States, 1997-1998 104 **Table 2.21.** Prevalence (% and 95% confidence interval) of selected reasons of current smokers Table 2.29. Stages of smoking cessation (% and 95% for using cigarettes, among girls aged confidence interval) among women smok-10-17 years and young women aged 18-22 ers aged 18 years or older, by selected characteristics, National Health Interview Suryears, by selected characteristics, Teenage vey, United States, 1992 109 Attitudes and Practices Survey II, United States, 1993 86 Table 2.30. Percentage (and 95% confidence interval) Table 2.22. Percentage (and 95% confidence interval) of young women smokers aged 18-24 years of current women smokers aged 18 years who have quit smoking, by selected charor older who reported selected indicators acteristics, National Health Interview Survey, United States, 1965-1998 112 of nicotine dependence, by race or ethnicity and quantity of cigarettes smoked, National Household Survey on Drug Abuse, Table 2.31. Percentage (and 95% confidence interval) United States, 1992-1994, aggregate data of persons aged 18 years or older who had smoked in the previous 12 months who reported receiving advice to quit smoking from a physician or other health care pro-Table 2.23. Percentage (and 95% confidence interval)

fessional in the preceding 12 months, by

of adolescents aged 12-17 years and young

|             | gender and selected characteristics, National Health Interview Survey, United States, 1991 114   |                    | smoking status, National Household Survey on Drug Abuse and Youth Risk Behavior Survey, United States, 1998–1999 129   |
|-------------|--|--------------------|--|
| Table 2.32. | Prevalence (% and 95% confidence interval) of ever and current cigar smoking among women aged 18 years or older, by selected characteristics, National Health Interview Survey, United States, 1970–1998 117   | Table 2.40.        | Prevalence (% and 95% confidence interval) of alcohol and marijuana use among adults aged 18 years or older, by gender, smoking status, and age, National Household Survey on Drug Abuse, United States, 1997–1998 132   |
| Table 2.33. | Prevalence (% and 95% confidence interval) of current cigar smoking among adolescents less than 18 years of age, by gender and selected characteristics, National Household Survey on Drug Abuse and Youth Risk Behavior Survey, United States, 1998–1999 118        | Table 2.41.        | Patterns of initiation of smoking and use of other substances (% and 95% confidence interval) among young adults aged 18–24 years who ever used cigarettes and another substance, by gender, National Household Survey on Drug Abuse, United States, 1997–1998 132 |
| Table 2.34. | Prevalence (% and 95% confidence interval) of current use of smokeless tobacco among adults aged 18 years or older, by gender and selected characteristics, National Health Interview Survey, United States, 1970 and 1991, 1992, 1994 (aggregate data) and 1998 120 | Table 2.42.        | Mean age (years and 95% confidence interval) at first use of cigarettes and other substances among young adults aged 18–24 years who had ever smoked cigarettes, by gender, National Household Survey on Drug Abuse, United States, 1997–1998 133                  |
| Table 2.35. | Percentage (and 95% confidence interval) of nonsmoking women aged 18 years or older who reported that anyone smoked in their immediate work area and the proportion of those exposed who reported being bothered by cigarette smoke in their imme-                   | Table 2.43.        | Prevalence (% and 95% confidence interval) of selected feelings during the 2 weeks before the survey among adults aged 18 years or older, by gender and smoking status, National Health Interview Survey, United States, 1991 134                                  |
|             | diate work area, by selected characteristics,<br>National Health Interview Survey, United<br>States, 1992 124  | Table 2.44.        | Estimated smoking prevalence among fe-<br>males and males aged 15 years or older, by<br>country and gender, latest available year<br>(ranked in order of female smoking preva-   |
| Table 2.36. | Percentage (and 95% confidence interval) of adolescents in grades 9–12 and less than   |                    | lence) 137   |
|             | 18 years of age who were attempting to lose weight, by gender and smoking status, Youth Risk Behavior Survey, United States,   | <b>Table 2.45.</b> | Smoking prevalence (%) among women in selected countries, 1970–1994 140  |
|             | 1999 126   | Figure 2.1.        | Prevalence (%) of current smoking among adults aged 18 years or older in the greater   |
| Table 2.37. | Perception of overweight (% and 95% confidence interval) among normal and under-   |                    | Milwaukee area and in the general U.S. population, by gender, 1935–1979 <i>27</i>  |
|             | weight women aged 18 years or older, by<br>smoking status and selected characteristics,<br>National Health Interview Survey, United<br>States, 1991 127  | Figure 2.2.        | Prevalence (%) of current smoking for 5-year cohorts, by race and ethnicity, gender, and age, United States, 1890–1964 30  |
| Table 2.38. | Average body mass index (and 95% confidence interval) among women aged 18 years or older, by smoking status and selected characteristics, National Health and Nutrition Examination Survey III, United States, 1988–1994 128   | Figure 2.3.        | Age-adjusted prevalence (%) of current smoking among women aged 18 years or older, by racial or ethnic group, National Health Interview Survey, United States, 1978–1998, aggregate data 38  |
| Table 2.39. | Prevalence (% and 95% confidence interval) of other drug use among girls and boys less than 18 years of age, by gender and   | Figure 2.4.        | Prevalence (%) of current smoking among adults aged 18 years or older, by gender, National Health Interview Survey, United States, 1965–1998 40  |

Figure 2.5. Prevalence (%) of current smoking among Figure 2.15. Percentage of girls aged 12-17 years and women aged 18 years or older, by state, young women aged 18-24 years who were Behavioral Risk Factor Survey, United current smokers who reported selected States, 1999 43 indicators of nicotine dependence, by age and quantity of cigarettes smoked, Nation-Figure 2.6. al Household Survey on Drug Abuse, Unit-Prevalence (%) of ever trying smoking and current smoking among adolescents aged ed States, 1992–1994, aggregate data 92 12-17 years, by gender, National Household Survey on Drug Abuse, United States, Figure 2.16. Percentage of smokers who have quit 1974-1998 55 smoking among adults aged 18 years or older and young adults aged 18-24 years, Figure 2.7. Prevalence (%) of current smoking among by gender, National Health Interview Surgirls, by grade in school, Monitoring the Fuvey, United States, 1965-1998 105 ture Survey, United States, 1975-2000 57 Figure 2.17. Smoking continuum among women aged Prevalence (%) of current smoking among Figure 2.8. 18 years or older who ever smoked, Naadolescents aged 12-17 years, by race and tional Health Interview Survey, United gender, National Household Survey on States, 1979 and 1990 108 Drug Abuse, United States, 1974-1998, ag-Figure 2.18. gregate data 58 Prevalence (%) of alcohol and marijuana use among high school senior girls, by Figure 2.9. Prevalence (%) of current smoking among smoking status, Monitoring the Future Survey, United States, 1998 131 young adults aged 18 years, for 1904-1969, National Health Interview Survey, and high school seniors, for 1976-1998, Monitoring the Future Survey, by gender and Chapter 3. Health Consequences of Tobacco Use race, United States 62 Among Women Figure 2.10. Prevalence (%) of daily smoking among **Table 3.1.** All-cause mortality among women for lifehigh school seniors, by gender, Monitorlong nonsmokers and current smokers, by ing the Future Survey, United States, 1976age, Cancer Prevention Study II, 1982-1988 2000 63 185 Figure 2.11. Median age at smoking initiation among **Table 3.2.** All-cause mortality among women for lifelong nonsmokers and current smokers, by adults aged 18 years or older, by race, gender, and birth cohort, United States, 1885age, Cancer Prevention Study I, 1959-1965 187 1944 75 Figure 2.12. **Table 3.3.** Age-adjusted and multivariate relative Percentage of persons aged 18 years or risks for all-cause mortality, by smoking older who ever smoked who started smokstatus and number of cigarettes smoked per ing fairly regularly by age 15 or 18 years, by race, gender, and birth cohort, United day, U.S. Nurses' Health Study, 1976-1988 States, 1900–1954 79 Figure 2.13. Percentage of young female current smok-**Table 3.4.** Relative risks among women for death from all causes, and smoking attributable ers aged 10-22 years who smoked their first fraction of deaths among smokers, with cigarette within 30 minutes of awakening, by age and quantity of cigarettes smoked, adjustment for age and multiple potential risk factors, Cancer Prevention Study II, Teenage Attitudes and Practices Survey II, United States, 1993 85 1982-1988 190 Figure 2.14. Percentage of girls aged 10-17 years and **Table 3.5.** Relative risks of death from lung cancer for young women aged 18-22 years who women and men, by quantity smoked, masmoked during the past week who reportjor prospective studies 196 ed selected symptoms of nicotine withdrawal during previous attempts to stop **Table 3.6.** Age-adjusted death rates, relative risks, smoking, by quantity of cigarettes smoked, and rate differences for lung cancer, among women and men who were current smok-Teenage Attitudes and Practices Survey II, United States, 1993 90 ers and never smokers, Cancer Prevention

Study I, 1959-1965, and Cancer Prevention

Study II, 1982-1988 197

| Table 3.7.  | Age-adjusted relative risks for lung cancer associated with smoking status and smoking cessation among women, cohort studies 198                                      | Table 3.21. | Relative risks for coronary heart disease among women for current smokers compared with nonsmokers, cohort studies 234   |
|-------------|---|-------------|--|
| Table 3.8.  | Relative risks for lung cancer among women smokers compared with nonsmokers, by smoking status and quantity smoked, case-control studies 199                          | Table 3.22. | Relative risks for coronary heart disease among women, by time since smoking cessation, case-control studies 236   |
| Table 3.9.  | Percent distribution of lung cancer cases, by gender, histologic type, and smoking status 202   | Table 3.23. | Relative risks for coronary heart disease among women, by time since smoking cessation, cohort studies 238   |
| Table 3.10. | Relative risks for lung cancer among women, by smoking status and histologic type, case-control studies 204   | Table 3.24. | Relative risks for stroke among women for current smokers compared with nonsmokers, case-control studies 242   |
| Table 3.11. | Relative risks for lung cancer associated with ever smoking for women and men, by histologic type 206   | Table 3.25. | Relative risks for stroke among women for current smokers compared with nonsmokers, cohort studies 244   |
| Table 3.12. | Age-standardized average annual death<br>rate for lung cancer among women, 1990–<br>1993, and percent increase between 1985<br>and 1990–1993, selected industrialized | Table 3.26. | Relative risks of stroke for women former smokers versus women who never smoked, by time since smoking cessation, case-control and cohort studies 246              |
| Table 3.13. | countries 210  Relative risks for breast cancer for smokers compared with nonsmokers, case-control  | Table 3.27. | Rate of decline in forced expiratory volume in 1 second among women and men, by smoking status, population-based studies, 1984–1996 <i>254</i>                     |
| Table 3.14. | studies 214  Relative risks for endometrial cancer for smokers compared with nonsmokers, case-control studies 218   | Table 3.28. | Prevalence of airflow limitation as measured by forced expiratory volume in 1 second among women and men, population-based, cross-sectional studies, 1989–1994 258 |
| Table 3.15. | Relative risks for ovarian cancer for smokers compared with nonsmokers, case-control studies 219  | Table 3.29. | Findings regarding smoking and dysmen-<br>orrhea 267   |
| Table 3.16. | Relative risks for invasive cervical cancer<br>for smokers compared with nonsmokers<br>and for quantity or duration of smoking,                                       | Table 3.30. | Findings regarding smoking and menstrual irregularity or secondary amenorrhea 268  |
| Table 3.17. | case-control studies 221  Relative risks for cervical intraepithelial   | Table 3.31. | Smoking and age at natural menopause 270   |
| Table 3.17. | neoplasia for smokers compared with non-<br>smokers, case-control studies 222   | Table 3.32. | Relative risks for conception among women smokers 274  |
| Table 3.18. | Relative risks for death from selected cancers among women, by smoking status, Cancer Prevention Study II, 1982–1988 225  | Table 3.33. | Relative risks for conception delay among women smokers 276  |
| Table 3.19. | Relative risks for primary liver cancer among women for smokers compared with   | Table 3.34. | Relative risks for infertility among women smokers, case-control studies 280   |
| Table 3.20. | nonsmokers, case-control studies 227  Relative risks for urinary tract cancer among women for smokers compared with   | Table 3.35. | Relative risks for preterm premature rup-<br>ture of membranes among women smok-<br>ers, case-control studies 282  |
|             | nonsmokers, case-control studies 229  | Table 3.36. | Relative risks for placental disorders among women smokers 284   |

| Table 3.37.        | Relative risks for spontaneous abortion among women smokers 288   | Table 3.53. | Relative risks for lung cancer associated with workplace exposure to environmental tobacco smoke among women who never smoked 351  |
|--------------------|---|-------------|--|
| Table 3.38.        | Relative risks for preterm delivery among women smokers 292   |             |  |
| Table 3.39.        | Relative risks for stillbirth or neonatal death among women smokers, cohort studies 296                                     | Table 3.54. | Associations between risk for coronary heart disease mortality or morbidity and exposure to environmental tobacco smoke among persons who never smoked, reviews 352      |
| Table 3.40.        | Difference in birth weight between infants born to women nonsmokers and those born to women smokers 297                     | Table 3.55. | Associations between adult exposure to environmental tobacco smoke from spous-   |
| Table 3.41.        | Relative risks for infants with low birth weight or small for gestational age among women smokers 298                       |             | es or household members or in the work place and relative risks for mortality or morbidity from coronary heart disease among persons who never smoked, cohor studies 354 |
| Table 3.42.        | Relative risks for congenital malformations among infants of women smokers 304  | Table 3.56. | Relative risks for coronary heart disease associated with adult exposure to environ-   |
| Table 3.43.        | Findings regarding the relationship between smoking and abdominal obesity as measured by waist-to-hip ratio 312             |             | mental tobacco smoke among persons who never smoked or nonsmokers, case-control studies 358  |
| Table 3.44.        | Relative bone density among premeno-<br>pausal women, for smokers compared with<br>nonsmokers, cross-sectional studies 314  | Table 3.57. | Differences in birth weight between infants of nonsmoking mothers exposed to environmental tobacco smoke (ETS) and infants of mothers not exposed to ETS, based on       |
| Table 3.45.        | Relative bone density among postmeno-<br>pausal women for smokers compared with   |             | measurement of biomarkers 362  |
| <b>Table 3.46.</b> | nonsmokers, cross-sectional studies 316  Relative risks for hip fracture among women, among current smokers, cohort studies | Table 3.58. | Relative risks for spontaneous abortion<br>among nonsmokers exposed to environ-<br>mental tobacco smoke (ETS) compared<br>with nonsmokers not exposed to ETS 365         |
|                    | 319   | Table 3.59. | Relative risks for congenital malformations  |
| Table 3.47.        | Relative risks for hip fracture among women smokers, case-control studies $320$   | 14020 01001 | among infants with prenatal exposure to environmental tobacco smoke 367  |
| <b>Table 3.48.</b> | Relative risks for fractures other than hip fractures among women smokers 322   | Figure 3.1. | All-cause death rates for current smokers<br>and lifelong nonsmokers, by age and gen-<br>der, Cancer Prevention Study II, 1982–1988                                      |
| Table 3.49.        | Relative risks for ulcerative colitis among former and current smokers, case-control  |             | 184  |
|                    | and cohort studies 326  | Figure 3.2. | All-cause death rates among women for current smokers and lifelong nonsmokers,   |
| Table 3.50.        | Relative risks for Crohn's disease among former and current smokers, case-control and cohort studies 328                    |             | by age, Cancer Prevention Study I, 1959–1965, and Cancer Prevention Study II, 1982–1988 186  |
| Table 3.51.        | Relative risks for Parkinson's disease among smokers, women and men, case-control studies 337                               | Figure 3.3. | Age-adjusted total mortality ratios among women (and 95% confidence interval) for current smokers compared with lifelong nonsmokers, prospective studies 188             |
| Table 3.52.        | Epidemiologic studies of environmental tobacco smoke and lung cancer published during 1992–1998 346                         |             |  |

Figure 3.4. Relative risks of death from all causes (and **Table 4.2.** Characteristics of 13 longitudinal studies 95% confidence interval) for current smokof smoking maintenance and cessation ers compared with lifelong nonsmokers, by among women who smoked regularly years since smoking cessation, U.S. Nurses' 480 Health Study, 1976–1988 191 Table 4.3. Factors found to predict attempts to stop Figure 3.5. smoking, smoking cessation, and relapse Cumulative probability of death from all causes among women who stopped smokto smoking among women who were current smokers in the 13 longitudinal studies ing, by smoking status and age at smoking cessation, Cancer Prevention Study II, 1984reviewed 489 1991 192 Table 4.4. Expenditures for domestic cigarette adver-Figure 3.6. Age-adjusted death rates for lung cancer tising and promotion, 1995-1998 491 and breast cancer among women, United States, 1930-1997 194 Figure 4.1. By the late 1920s, women were appearing in ads for Old Gold and other cigarette Figure 3.7. brands 494 Lung cancer incidence rates among white women and black women, Surveillance, Epidemiology, and End Results Program, 1996-Figure 4.2. In 1938, a Camel ad featured a business "girl," and in the World War II era, Ches-1997 195 terfield and Camel ads showed women in Figure 3.8. Trends in lung cancer incidence among war industry garb and military uniform, women, by histologic type, Surveillance, respectively-all touting the mildness of Epidemiology, and End Results Program, cigarettes 495 1973-1992 207 A 1943 Marlboro ad in six women's maga-Figures 4.3. Figure 3.9. Age-adjusted death rates for chronic obzines promoted a red beauty tip to hide lipstructive pulmonary disease, by gender and stick stains 496 race, United States, 1980-1992 260 Figures 4.4. The best known advertising campaign of Figure 3.10. Exposure to environmental tobacco smoke the American Tobacco Company appealed from spouses' smoking and relative risks to the desire of women to be slim, as shown for mortality or morbidity from coronary by 1920s and 1930s Lucky Strike ads 496 heart disease, cohort studies 356 Figures 4.5. A 1946 Camel ad featured a female physi-Figure 3.11. Exposure to environmental tobacco smoke cian—one of the testimonials claiming benfrom spouses' smoking and risk of coroefits of cigarettes and the throat 497 nary heart disease, case-control studies 360 Figures 4.6. In a 1952 ad, Pall Mall used the image of a fashionable woman as part of a health pro-Figure 3.12. tection theme 498 Differences in mean birth weight (and 95% confidence interval) among infants of mothers exposed to environmental tobac-Figures 4.7. Cumulative percentage of females who had co smoke (ETS) compared with infants of become regular smokers, by birth cohort mothers not exposed to ETS 361 Figure 3.13. Relative risks (95% confidence interval) for Figure 4.8. Smoking initiation rates for 14- to 17-yearlow birth weight or intrauterine growth old girls, 1966-1979, and expenditures for retardation among infants of mothers three cigarette brands targeted to women, 1967-1978 501 exposed to environmental tobacco smoke (ETS) compared with infants of mothers not exposed to ETS 363 Figure 4.9. Philip Morris launched advertising of Virginia Slims in 1968 with the slogan "You've come a long way, baby" and switched in **Chapter 4. Factors Influencing Tobacco Use** the 1990s to "It's a woman thing" 502

Figure 4.10.

Among Women

Longitudinal studies with gender-specific

findings on beliefs, experiences, and behaviors related to smoking initiation 456

Table 4.1.

Ads from the multicultural "Find Your

Voice" campaign 503

## Surgeon General's Report

| Chapter 5. I<br>Among Wo | Efforts to Reduce Tobacco Use<br>men  |            | A Vision for the Future: What Is<br>Reduce Smoking Among Women                                      |
|--------------------------|---|------------|---|
| Figure 4.13.             | Dakota ad conveys the image of women enjoying warm, fun relationships with men 512  | Table 5.5. | Support for restrictions on marketing and advertising of tobacco products, by gender 596            |
|                          | Superslims, with the claim of reduced side-<br>stream smoke; "slim 'n sassy" Misty; and<br>Capri, "the slimmest slim" 508 | Table 5.4. | Support for restrictions on vending machines, by gender 595   |
| Figure 4.12.             | By the late 1980s and into the 1990s, cigarette manufacturers were trying to make products more appealing to women:       | Table 5.3. | Support for policies that prohibit smoking in public places, by gender 593                          |
| Figure 4.11.             | Tobacco marketers targeted particular brands to women—Eve, Style, Satin, and More 507                                     | Table 5.2. | Changes in smoking behavior reported in studies of community-based smoking cessation programs $590$ |

## Among Women

Women's access to worksite to bacco control resources in various industries during the 1990s 585**Table 5.1.** 

No tables or figures.